#### Case 15-41786 Doc 1 Filed 12/11/15 Entered 12/11/15 01:08:37 Desc Main Document Page 1 of 46

| Fill in this information to identify your case: |                               |                                   |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the:         |                               |                                   |
| NORTHERN DISTRICT OF ILLINOIS                   |                               |                                   |
| Case number (if known)                          | Chapter you are filing under: |                                   |
|   | Chapter 7                     |                                   |
|   | ☐ Chapter 11                  |                                   |
|   | ☐ Chapter 12                  |                                   |
|   | ☐ Chapter 13                  | ☐ Check if this an amended filing |

B 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | 't 1:                 | Identify Yourself   |  |   |
|-----|-----------------------|---|--|---|
|     |                       |   | About Debtor 1:                                    | About Debtor 2 (Spouse Only in a Joint Case): |
| 1.  | You                   | r full name   |  |   |
|     | your<br>pictu<br>exar | e the name that is on<br>government-issued<br>ure identification (for<br>mple, your driver's<br>use or passport). | Jose First name                                    | First name                                    |
|     | Brin<br>iden          | g your picture<br>tification to your<br>ting with the trustee.  | Alvarado  Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III)      |
| 2.  |                       | other names you have<br>d in the last 8 years   |  |   |
|     |                       | ude your married or<br>den names.   |  |   |
| 3.  | you<br>num<br>Indi    | y the last 4 digits of<br>r Social Security<br>nber or federal<br>vidual Taxpayer<br>ntification number           | xxx-xx-3578  |   |

Debtor 1 Jose I Alvarado

Page 2 of 46 Case number (if known)

|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |
|----|--|---|---|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | I have not used any business name or EINs.  Business name(s)  EINs  | ☐ I have not used any business name or EINs.  Business name(s)  EINs  |
| 5. | Where you live   | 499 Maple Ave Carpentersville, IL 60110 Number, Street, City, State & ZIP Code Kane County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code | If Debtor 2 lives at a different address:  Number, Street, City, State & ZIP Code  County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for bankruptcy  | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)   | Check one:  ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)   |

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Case number (if known) Debtor 1 Jose I Alvarado

| Par | Tell the Court About   | Your B      | Bankruptcy Ca                                       | ise   |  |  |       |  |
|-----|--|-------------|---|---|--|--|-------|--|
| 7.  | The chapter of the Bankruptcy Code you are                                   |             |   |   | of each, see Notice Required by f page 1 and check the appropriate   | 11 U.S.C. § 342(b) for Individuals Filing for Bankru<br>e box.   | ptcy  |  |
|     | choosing to file under   | ■ Chapter 7 |   |   |  |  |       |  |
|     |  | □с          | hapter 11   |   |  |  |       |  |
|     |  | □с          | hapter 12   |   |  |  |       |  |
|     |  | □с          | hapter 13   |   |  |  |       |  |
| 3.  | How you will pay the fee   | •           | about how yo  | ou may pay. Typ<br>attorney is subi                       | pically, if you are paying the fee yo  | ck with the clerk's office in your local court for more burself, you may pay with cash, cashier's check, or alf, your attorney may pay with a credit card or che   | money |  |
|     |  |             |   |   | tallments. If you choose this options (Official Form 103A).  | on, sign and attach the Application for Individuals to   | o Pay |  |
|     |  |             | I request that<br>but is not req<br>that applies to | at my fee be wa<br>uired to, waive y<br>o your family siz | <b>lived</b> (You may request this option your fee, and may do so only if your fee and you are unable to pay the | n only if you are filing for Chapter 7. By law, a judge<br>our income is less than 150% of the official poverty<br>fee in installments). If you choose this option, you r<br>Official Form 103B) and file it with your petition. | line  |  |
| ).  | Have you filed for   | ■ No        |   |   |  |  |       |  |
|     | bankruptcy within the last 8 years?  |             |   |   |  |  |       |  |
|     | iast o years !   | <b>□</b> 16 | es.<br>District                                     |   | When   | Case number  |       |  |
|     |  |             | District  |   | When   | Case number Case number  |       |  |
|     |  |             | District  |   | When   | Case number  |       |  |
| 10. | Are any bankruptcy   | ■ No        |   |   |  |  |       |  |
|     | cases pending or being filed by a spouse who is                              |             |   |   |  |  |       |  |
|     | not filing this case with you, or by a business partner, or by an affiliate? | <b>—</b> те | es.   |   |  |  |       |  |
|     |  |             | Debtor  |   |  | Relationship to you  |       |  |
|     |  |             | District  |   | When   | Case number, if known  |       |  |
|     |  |             | Debtor  |   |  | Relationship to you  |       |  |
|     |  |             | District  |   | When   | Case number, if known  |       |  |
| 11. | Do you rent your residence?  | ■ No        | Go to I   | ine 12.   |  |  |       |  |
|     | residence :  | □ Ye        | es. Has yo  | our landlord obta   | ained an eviction judgment agains  | st you and do you want to stay in your residence?  |       |  |
|     |  |             |   | No. Go to line  | 12.  |  |       |  |
|     |  |             |   | Yes. Fill out <i>In</i> bankruptcy pet                    |  | Judgment Against You (Form 101A) and file it with  | this  |  |
|     |  |             |   |   |  |  |       |  |

|          |                 | Document | Page 4 01 40           |  |
|----------|-----------------|----------|------------------------|--|
| Debtor 1 | Jose I Alvarado |          | Case number (if known) |  |

| Part | Report About Any Bus  | sinesses \   | ou Own                                  | as a Sole Proprietor                                   | r   |  |
|------|---|--------------|---|--|---|--|
| 12.  | Are you a sole proprietor of any full- or part-time business?   | ■ No.        | Go to                                   | Part 4.  |   |  |
|      |   | ☐ Yes.       | Name                                    | and location of busine                                 | ess   |  |
|      | A sole proprietorship is a<br>business you operate as<br>an individual, and is not a<br>separate legal entity such<br>as a corporation,<br>partnership, or LLC. |              | Name                                    | Name of business, if any                               |   |  |
|      | If you have more than one sole proprietorship, use a separate sheet and attach  |              | Numb                                    | er, Street, City, State                                | & ZIP Code  |  |
|      | it to this petition.  |              | Check                                   | the appropriate box t                                  | to describe your business:  |  |
|      |   |              |   | Health Care Busines                                    | ss (as defined in 11 U.S.C. § 101(27A))   |  |
|      |   |              |   | Single Asset Real E                                    | state (as defined in 11 U.S.C. § 101(51B))  |  |
|      |   |              |   | Stockbroker (as defi                                   | ined in 11 U.S.C. § 101(53A))   |  |
|      |   |              |   | Commodity Broker (                                     | (as defined in 11 U.S.C. § 101(6))  |  |
|      |   |              |   | None of the above                                      |   |  |
| 13.  | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code and are<br>you a small business<br>debtor?   | deadlines    | s. If you in<br>s, cash-fl<br>.C. 1116( | dicate that you are a sow statement, and fed<br>1)(B). | ourt must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement of deral income tax return or if any of these documents do not exist, follow the procedure |  |
|      | For a definition of small   | No.          | I am n                                  | ot filing under Chapte                                 | er 11.  |  |
|      | business debtor, see 11 U.S.C. § 101(51D).  | □ No.        | I am fi<br>Code.                        | ling under Chapter 11                                  | I, but I am NOT a small business debtor according to the definition in the Bankruptcy   |  |
|      |   | ☐ Yes.       | I am fi                                 | ling under Chapter 11                                  | I and I am a small business debtor according to the definition in the Bankruptcy Code.  |  |
| Part | Report if You Own or  | Have Anv     | Hazardo                                 | us Property or Any F                                   | Property That Needs Immediate Attention   |  |
|      | Do you own or have any  |              |   |  |   |  |
| 14.  | property that poses or is alleged to pose a threat of imminent and  | ■ No. □ Yes. | What is                                 | he hazard?   |   |  |
|      | identifiable hazard to<br>public health or safety?<br>Or do you own any<br>property that needs<br>immediate attention?  |              |   | iate attention is<br>why is it needed?                 |   |  |
|      | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?   |              | Where is                                | the property?  | Number, Street, City, State & Zip Code  |  |
|      |   |              |   | IN.  | Number, Street, Oity, State & Zip Code  |  |

Debtor 1 Jose I Alvarado Document Page 5 of 46 Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a

mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes

me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military

П

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a | a briefing about | credit |
|--------------------------------|------------------|--------|
| counseling because of:         |                  |        |

☐ Incapacity. I have a mental illness or a mental deficiency that makes me incapable

of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 46 Case number (if known) Debtor 1 Jose I Alvarado Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. □ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative Yes. after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 □ 50-99 owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 □ 200-999 How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **□** \$100.001 - \$500.000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **□** \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jose I Alvarado Signature of Debtor 2 Jose I Alvarado Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on December 11, 2015

MM / DD / YYYY

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Debtor 1 Jose I Alvarado Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Israel M    | loskovits              | Date          | December 11, 2015     |
|-----------------|------------------------|---------------|-----------------------|
| Signature of    | Attorney for Debtor    |               | MM / DD / YYYY        |
| 11 1 41         |                        |               |                       |
| Israel Mosk     | KOVITS                 |               |                       |
| Printed name    |                        |               |                       |
| THE SEMP        | RAD LAW FIRM, LLC      |               |                       |
| Firm name       |                        |               |                       |
| 20 S. Clark     | Street                 |               |                       |
| 28th Floor      |                        |               |                       |
| Chicago, IL     | <sub>-</sub> 60603     |               |                       |
| Number, Street, | City, State & ZIP Code |               |                       |
| Contact phone   | (312) 913 0625         | Email address | rsemrad@semradlaw.com |
| 6302579         |                        |               |                       |
| Bar number & St | tate                   |               | <del></del>           |

|                    |                          | Docume            | eni Page 8 di 46 |             |
|--------------------|--------------------------|-------------------|------------------|-------------|
| Fill in this infor | mation to identify your  | case:             |                  |             |
| Debtor 1           | Jose I Alvarado          |                   |                  |             |
|                    | First Name               | Middle Name       | Last Name        | <del></del> |
| Debtor 2           |                          |                   |                  |             |
| Spouse if, filing) | First Name               | Middle Name       | Last Name        |             |
| Jnited States Ba   | inkruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS      |             |
| Case number _      |                          |                   |                  |             |

☐ Check if this is an amended filing

## Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

|     |  | Your a     | ssets<br>of what you own |
|-----|--|------------|--------------------------|
| 1.  | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$         | 0.00                     |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$         | 2,420.00                 |
|     | 1c. Copy line 63, Total of all property on Schedule A/B  | \$         | 2,420.00                 |
| Par | t 2: Summarize Your Liabilities  |            |                          |
|     |  |            | iabilities<br>nt you owe |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$         | 0.00                     |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                            | \$         | 0.00                     |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$         | 24,633.98                |
|     | Your total liabilities   | \$         | 24,633.98                |
| Par | t 3: Summarize Your Income and Expenses  |            |                          |
| 4.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$         | 1,690.00                 |
| 5.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$         | 1,815.00                 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records   |            |                          |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo                      | ur other s | chedules.                |
| 7.  | ■ Yes What kind of debt do you have?   |            |                          |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |    |
|----|--|----|
|    | 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.                              | \$ |

2,821.43

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Tot  | tal claim |
|--|------|-----------|
| From Part 4 on Schedule E/F, copy the following:   |      |           |
| 9a. Domestic support obligations (Copy line 6a.)   | \$ . | 0.00      |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$   | 0.00      |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$   | 0.00      |
| 9d. Student loans. (Copy line 6f.)   | \$   | 0.00      |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$   | 0.00      |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$  | 0.00      |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$   | 0.00      |

|                        |                                  | 100 10 41700   | Document Document  | Page 10 of 46   |  | COO WIGHT   |
|------------------------|----------------------------------|--|--|---|--|---|
| Fill in                | this infor                       | mation to identify your                              | case and this filing:  |   |  |   |
| Debto                  | r 1                              | Jose I Alvarado                                      |  |   |  |   |
| Debto                  | r 2                              | First Name   | Middle Name  | Last Name   |  |   |
|                        | e, if filing)                    | First Name   | Middle Name  | Last Name   |  |   |
| United                 | d States Ba                      | ankruptcy Court for the:                             | NORTHERN DISTRICT OF ILL   | INOIS   |  |   |
| Case                   | number                           |  |  |   |  | ☐ Check if this is an                               |
|                        | _                                |  |  | <del>_</del>  |  | amended filing                                      |
|                        |                                  |  |  |   |  |   |
| Offic                  | cial Fo                          | rm 106A/B  |  |   |  |   |
| Sch                    | nedul                            | e A/B: Prop  | erty   |   |  | 12/15   |
|                        |                                  |  | e items. List an asset only once. If a   |   |  |   |
|                        |                                  |  | et to this form. On the top of any ad  |   |  |   |
| Part 1:                | Describe                         | Each Residence, Building                             | , Land, or Other Real Estate You Ov  | vn or Have an Interest In                               |  |   |
| . Do y                 | ou own or h                      | nave any legal or equitable                          | interest in any residence, building,   | land, or similar property?                              |  |   |
| ■ N                    | lo. Go to Par                    | t 2.   |  |   |  |   |
| □ Y                    | es. Where i                      | s the property?                                      |  |   |  |   |
| Part 2:                | Describe                         | Your Vehicles  |  |   |  |   |
|                        |                                  |  |  |   |  |   |
| <b>Do you</b><br>someo | <b>ı own, lea</b><br>ne else dri | se, or have legal or eq<br>ves. If vou lease a vehic | uitable interest in any vehicles<br>ele, also report it on Schedule G:             | , whether they are registe<br>Executory Contracts and U | red or not? Include any<br>Inexpired Leases. | vehicles you own that                               |
|                        |                                  |  | tility vehicles, motorcycles   | ,   | ,      |   |
| ). Cai                 | s, vaiis, u                      | ucks, tractors, sport u                              | tility verificies, motorcycles   |   |  |   |
| ■ N                    | lo                               |  |  |   |  |   |
| ПΥ                     | 'es                              |  |  |   |  |   |
|                        |                                  |  | TVo and other researchismel val  | rialas athan rahialas ana                               |  |   |
|                        | ,                                | ,  | ATVs and other recreational velocational velocational watercraft, fishing vessels, | ,   |  |   |
|                        | lo                               |  |  |   |  |   |
| ■ Y                    |                                  |  |  |   |  |   |
|                        |                                  |  |  |   |  |   |
| 4.1                    | Make: _                          |  | Who has an interest in th  | ne property? Check one.                                 |  | claims or exemptions. Put red claims on Schedule D: |
|                        | Model:                           |  | Debtor 1 only  |   |  | aims Secured by Property.                           |
|                        | Year:                            |  | Debtor 2 only  | anh   | Current value of the entire property?        | Current value of the portion you own?               |
|                        | Other inforr                     | nation:  | ☐ Debtor 1 and Debtor 2 ☐ At least one of the deb                                  | •   | entire property:                             | portion you own:                                    |
|                        | Boat - no                        | engine   | ☐ Check if this is comm  |   | \$200.00                                     | £200.00   |
|                        |                                  | r purchase price                                     | instructions)  |   | \$200.00                                     | \$200.00  |
|                        |                                  |  |  |   |  |   |
|                        |                                  |  |  |   |  |   |
|                        |                                  |  | you own for all of your entries . Write that number here                           |   |  | \$200.00  |
|                        | _                                |  |  |   |  |   |
| Part 3:                |                                  | Your Personal and House                              |  | wing itomo?   |  | Current value of the                                |
| БО УО                  | u own or                         | nave any legal of equi                               | table interest in any of the follo   | wing items?   |  | portion you own?                                    |
|                        |                                  |  |  |   |  | Do not deduct secured                               |
|                        |                                  | oods and furnishings                                 |  |   |  | claims or exemptions.                               |
| Exa                    | •                                | ajor appliances, furniture                           | e, linens, china, kitchenware  |   |  |   |

Yes. Describe.....
Official Form 106A/B

Case 15-41786 Doc 1 Filed 12/11/15 Entered 12/11/15 01:08:37 Desc Main Document Page 11 of 46 Case number (if known) Debtor 1 Jose I Alvarado \$400.00 Furniture 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No ■ Yes. Describe..... \$100.00 Electronics 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$400.00 Clothing Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$200.00 Jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,100.00 for Part 3. Write that number here ...... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own?

16. **Cash** 

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

□ No

Do not deduct secured claims or exemptions.

Case 15-41786 Doc 1 Filed 12/11/15 Entered 12/11/15 01:08:37 Desc Main Document Page 12 of 46 Case number (if known) Debtor 1 Jose I Alvarado Yes..... Cash \$10.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... Checking account with BMO Harris Bank \$0.00 17.1. Savings account with BMO Harris Bank \$10.00 17.2. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☐ Yes. Give specific information about them...

Document Page 13 of 46 Debtor 1 Case number (if known) Jose I Alvarado 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ☐ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... Anticipated 2015 taz refund \$1,100.00 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information...... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information... 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$1,120.00 for Part 4. Write that number here.....

37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6.

Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

Case 15-41786

Doc 1

Filed 12/11/15

Entered 12/11/15 01:08:37

Desc Main

Case 15-41786 Doc 1 Filed 12/11/15 Entered 12/11/15 01:08:37 Desc Main Document Page 14 of 46 Case number (if known) Debtor 1 Jose I Alvarado Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$200.00 57. Part 3: Total personal and household items, line 15 \$1,100.00 58. Part 4: Total financial assets, line 36 \$1,120.00 Part 5: Total business-related property, line 45 \$0.00

\$0.00

\$0.00

Copy personal property total

\$2,420.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

Part 6: Total farm- and fishing-related property, line 52

Part 7: Total other property not listed, line 54

62. Total personal property. Add lines 56 through 61...

\$2,420.00

\$2,420.00

Official Form 106A/B Schedule A/B: Property page 5

|   |                          | Docume            | <u>III — Paue 15 01 40</u> |                                      |
|---|--------------------------|-------------------|----------------------------|--------------------------------------|
| Fill in this info                       | rmation to identify your | case:             |                            |                                      |
| Debtor 1                                | Jose I Alvarado          |                   |                            |                                      |
|   | First Name               | Middle Name       | Last Name                  |                                      |
| Debtor 2                                |                          |                   |                            |                                      |
| (Spouse if, filing)                     | First Name               | Middle Name       | Last Name                  |                                      |
| United States Bankruptcy Court for the: |                          | NORTHERN DISTRICT | OF ILLINOIS                |                                      |
| Case number                             |                          |                   |                            |                                      |
| (if known)                              |                          |                   |                            | ☐ Check if this is ar amended filing |

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim Specific laws that allow exemption |
|---|--------------------------------------|--|
|   | Copy the value from<br>Schedule A/B  | Check only one box for each exemption.                               |
| Boat - no engine<br>Value per purchase price  | \$200.00                             | \$200.00 735 ILCS 5/12-1001(b)                                       |
| Line from <i>Schedule A/B</i> : 4.1   |                                      | □ 100% of fair market value, up to any applicable statutory limit    |
| Furniture Line from Schedule A/B: 6.1   | \$400.00                             | \$400.00 735 ILCS 5/12-1001(b)                                       |
| Ente from <i>confederation</i> 22. C. 1   |                                      | □ 100% of fair market value, up to any applicable statutory limit    |
| Electronics Line from Schedule A/B: 7.1   | \$100.00                             | \$100.00 735 ILCS 5/12-1001(b)                                       |
| Ente from Goriodale 772. 7.1  |                                      | □ 100% of fair market value, up to any applicable statutory limit    |
| Clothing Line from Schedule A/B: 11.1   | \$400.00                             | \$400.00 735 ILCS 5/12-1001(a)                                       |
| Life from Schedule Arb. 11.1  |                                      | □ 100% of fair market value, up to any applicable statutory limit    |
| Jewelry Line from Schedule A/B: 12.1  | \$200.00                             | \$200.00 735 ILCS 5/12-1001(b)                                       |
| Line from Concedite FVD. 12.1   |                                      | □ 100% of fair market value, up to any applicable statutory limit    |

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Case I Alvarado Case number (if known)

| Brief description of the property and line on<br>Schedule A/B that lists this property | Current value of the portion you own | Amo     | ount of the exemption you claim                                 | Specific laws that allow exemption |
|--|--------------------------------------|---------|---|------------------------------------|
|  | Copy the value from<br>Schedule A/B  | Che     | ck only one box for each exemption.                             |                                    |
| Cash Line from Schedule A/B: 16.1  | \$10.00                              |         | \$10.00   | 735 ILCS 5/12-1001(b)              |
| Line Holli Golledale 74 B. 10.1  |                                      |         | 100% of fair market value, up to any applicable statutory limit |                                    |
| Savings account with BMO Harris Bank<br>Line from Schedule A/B: 17.2                   | \$10.00                              |         | \$10.00   | 735 ILCS 5/12-1001(b)              |
| Line Holli Schedule A.B. 17.2  |                                      |         | 100% of fair market value, up to any applicable statutory limit |                                    |
| Anticipated 2015 taz refund  | \$1,100.00                           |         | \$1,100.00  | 735 ILCS 5/12-1001(b)              |
| Line Holli Schedule AVD. 20.1  |                                      |         | 100% of fair market value, up to any applicable statutory limit |                                    |
| Are you claiming a homestead exemption (Subject to adjustment on 4/01/16 and every  No |                                      |         | iled on or after the date of adjustme                           | ent.)                              |
| Yes. Did you acquire the property covered No   | ed by the exemption w                | ithin 1 | ,215 days before you filed this case                            | 9?                                 |

Yes

|   |                          | DOM:              | 111 1 (1000) 17 (1) 40 |  |
|---|--------------------------|-------------------|------------------------|--|
| Fill in this infor                      | rmation to identify your | case:             |                        |  |
| Debtor 1                                | Jose I Alvarado          |                   |                        |  |
|   | First Name               | Middle Name       | Last Name              |  |
| Debtor 2                                |                          |                   |                        |  |
| (Spouse if, filing)                     | First Name               | Middle Name       | Last Name              |  |
| United States Bankruptcy Court for the: |                          | NORTHERN DISTRICT | OF ILLINOIS            |  |
| Case number                             |                          |                   |                        |  |
| (if known)                              |                          |                   |                        |  |
|   |                          |                   |                        |  |

### Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

|  |   | Document  | Paue  | 10 UI 40  |  |   |                                     |
|--|---|---|---|---|--|---|-------------------------------------|
| Fill in                                | this information to identify your case:   |   |   |   |  |   |                                     |
| Debto                                  |   |   |   |   |  |   |                                     |
| D - l- 1                               | First Name  | Middle Name   | Last Name                                       |   |  |   |                                     |
| Debtoi<br>(Spouse                      | if, filing) First Name  | Middle Name   | Last Name                                       |   |  |   |                                     |
| Linitad                                | States Bankruptcy Court for the: NOI  | RTHERN DISTRICT OF IL   | LINOIS  |   |  |   |                                     |
| Officed                                | States Bankruptcy Court for the.  | THERN DISTRICT OF IL  | LINOIS  |   |  |   |                                     |
|  | number  |   |   |   | _  |   |                                     |
| (if knowr                              | 1)  |   |   |   |  | Check if this is amended filing                           |                                     |
|  |   |   |   |   |  | amenaca min   | 9                                   |
| Offic                                  | ial Form 106E/F   |   |   |   |  |   |                                     |
| Sch                                    | edule E/F: Creditors Wh   | o Have Unsecu   | red Cla   | aims  |  |   | 12/15                               |
| iny exe<br>Schedu<br>D: Cred<br>he Con | omplete and accurate as possible. Use Part cutory contracts or unexpired leases that co led G: Executory Contracts and Unexpired Leitors Who Have Claims Secured by Property tinuation Page to this page. If you have no ir (if known). | uld result in a claim. Also li<br>ases (Official Form 106G). D<br>. If more space is needed, co<br>nformation to report in a Part | st executory<br>o not include<br>opy the Part y | contracts on Schedule A/B: Prope<br>e any creditors with partially secur<br>you need, fill it out, number the ent | erty (Offici<br>red claims<br>tries in the | ial Form 106A/B)<br>that are listed in<br>boxes on the le | and on<br>n Schedule<br>eft. Attach |
|  |   |   |   |   |  |   |                                     |
| 1.                                     | Do any creditors have priority unsecured cla  | aims against you?   |   |   |  |   |                                     |
|  | No. Go to Part 2.   |   |   |   |  |   |                                     |
| Part 2                                 | Yes. List All of Your NONPRIORITY Uns   | secured Claims  |   |   |  |   |                                     |
|  | Do any creditors have nonpriority unsecure  |   |   |   |  |   |                                     |
| Э.                                     |   |   |   | h - dul   |  |   |                                     |
|  | ☐ No. You have nothing to report in this part.  | Submit this form to the court w   | itri your otner                                 | scriedules.   |  |   |                                     |
|  | Yes.  |   |   |   |  |   |                                     |
| 4.                                     | List all of your nonpriority unsecured claims<br>unsecured claim, list the creditor separately for<br>than one creditor holds a particular claim, list the<br>Part 2.   | each claim. For each claim lis  | sted, identify w                                | what type of claim it is. Do not list clai  | ims already                                | y included in Part  | 1. If more                          |
|  | . 4.1.2.  |   |   |   |  | Total claim   |                                     |
| 4.1                                    | A/r Concepts  | Last 4 digits of accou  | ınt number                                      | 0200  |  | \$  | 402.00                              |
|  | Nonpriority Creditor's Name<br>18-3 E Dundee Rd   | When was the debt in  | ncurred?  |   | _  |   |                                     |
|  | Barrington, IL 60010  Number Street City State Zlp Code   | As of the date you file   | e, the claim is                                 | s: Check all that apply   |  |   |                                     |
|  | Who incurred the debt? Check one.   |   |   |   |  |   |                                     |
|  | Debtor 1 only   | ☐ Contingent  |   |   |  |   |                                     |
|  | Debtor 2 only   | ☐ Unliquidated  |   |   |  |   |                                     |
|  | _   |   |   |   |  |   |                                     |
|  | Debtor 1 and Debtor 2 only  | ☐ Disputed  Type of NONPRIORIT  | V unsecured                                     | d claim:  |  |   |                                     |
|  | At least one of the debtors and another   |   | i unsecureu                                     | r Claiili.  |  |   |                                     |
|  | ☐ Check if this claim is for a community debt   | ☐ Student loans   |   |   |  |   |                                     |
|  | Is the claim subject to offset?   | Obligations arising not report as priority cl   |   | ration agreement or divorce that you  | did  |   |                                     |
|  | ■ No  | Debts to pension o  | r profit-sharing                                | g plans, and other similar debts  |  |   |                                     |
|  | Yes   | Other. Specify  | 04 Villa  | age Of Carpentersville  |  |   |                                     |
| 4.2                                    | Comcast   | Last 4 digits of accou  | unt number                                      | _   |  | \$  | 300.00                              |
|  | Nonpriority Creditor's Name<br>1255 W. North Ave<br>Chicago, II, 60622-1562   | When was the debt in  | ocurred?  |   | _  |   |                                     |

As of the date you file, the claim is: Check all that apply

Number Street City State Zlp Code

| Debto | Case 15-41786 Doc 1   | Filed 12/11/15 Entered 12/11/15 01:08:37  Document Page 19 of 46  Case number (if know)                                     | Desc Main |          |
|-------|---|---|-----------|----------|
|       | Who incurred the debt? Check one.                                     | □ Contingent  |           |          |
|       | ■ Debtor 1 only   | commigant   |           |          |
|       | Debtor 2 only   | ☐ Unliquidated  |           |          |
|       | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |           |          |
|       | $\square$ At least one of the debtors and another                     | Type of NONPRIORITY unsecured claim:  |           |          |
|       | ☐ Check if this claim is for a community debt                         | ☐ Student loans   |           |          |
|       | Is the claim subject to offset?                                       | $\hfill \Box$<br>Obligations arising out of a separation agreement or divorce that you did not report as priority claims    |           |          |
|       | ■ No  | lacktriangle Debts to pension or profit-sharing plans, and other similar debts  |           |          |
|       | Yes   | ■ Other. Specify Unsecured  |           |          |
| 4.3   | ComEd   | Last 4 digits of account number   | \$        | 400.00   |
|       | Nonpriority Creditor's Name 3 Lincoln Center Attn: Bankruptcy Section | When was the debt incurred?   |           |          |
|       | Oakbrook Terrace, IL 60181  Number Street City State Zlp Code         | As of the date you file, the claim is: Check all that apply   |           |          |
|       | Who incurred the debt? Check one.                                     | ☐ Contingent  |           |          |
|       | Debtor 1 only   |   |           |          |
|       | Debtor 2 only   | ☐ Unliquidated  |           |          |
|       | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |           |          |
|       | At least one of the debtors and another                               | Type of NONPRIORITY unsecured claim:  |           |          |
|       | ☐ Check if this claim is for a community debt                         | ☐ Student loans   |           |          |
|       | Is the claim subject to offset?                                       | $\hfill \square$<br>Obligations arising out of a separation agreement or divorce that you did not report as priority claims |           |          |
|       | ■ No  | lacktriangle Debts to pension or profit-sharing plans, and other similar debts  |           |          |
|       | Yes   | ■ Other. Specify Unsecured  |           |          |
| 4.4   | Nicor   | Last 4 digits of account number   | \$        | 900.00   |
|       | Nonpriority Creditor's Name   |   |           |          |
|       | P.O. Box 2020<br>Aurora, IL 60507                                     | When was the debt incurred?   |           |          |
|       | Number Street City State Zlp Code                                     | As of the date you file, the claim is: Check all that apply   |           |          |
|       | Who incurred the debt? Check one.                                     | ☐ Contingent  |           |          |
|       | ■ Debtor 1 only □ Debtor 2 only                                       | ☐ Unliquidated  |           |          |
|       | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |           |          |
|       | ☐ At least one of the debtors and another                             | Type of NONPRIORITY unsecured claim:  |           |          |
|       | ☐ Check if this claim is for a community                              | ☐ Student loans   |           |          |
|       | debt<br>Is the claim subject to offset?                               | ☐ Obligations arising out of a separation agreement or divorce that you did   |           |          |
|       | <b>=</b>  | not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts                            |           |          |
|       | ■ No  |   |           |          |
|       | Yes   | ■ Other. Specify Unsecured  |           |          |
| 4.5   | Sherman Hospital  | Last 4 digits of account number   | \$        | 5,000.00 |
|       | Nonpriority Creditor's Name   |   |           |          |

934 Center Street

Elgin, IL 60120-2198

Number Street City State Zlp Code

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

| Debto | Case 15-41786 Doc 1  or 1 Jose I Alvarado  | Filed 12/11/15   | Desc Main |           |
|-------|--|--|-----------|-----------|
|       | Who incurred the debt? Check one.  Debtor 1 only                                 | ☐ Contingent   |           |           |
|       | Debtor 2 only  | ☐ Unliquidated   |           |           |
|       | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another           | ☐ Disputed  Type of NONPRIORITY unsecured claim:   |           |           |
|       | ☐ Check if this claim is for a community debt                                    | ☐ Student loans  |           |           |
|       | Is the claim subject to offset?  | $\hfill \Box$<br>Obligations arising out of a separation agreement or divorce that you did not report as priority claims |           |           |
|       | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts  |           |           |
|       | Yes  | ■ Other. Specify Medical   |           |           |
| 4.6   | Stanisccontr   | Last 4 digits of account number 04N1   | \$        | 364.00    |
|       | Nonpriority Creditor's Name Po Box 480   | When was the debt incurred?  |           |           |
|       | Modesto, CA 95353  Number Street City State Zlp Code                             | As of the date you file, the claim is: Check all that apply  |           |           |
|       | Who incurred the debt? Check one.  | ☐ Contingent   |           |           |
|       | ■ Debtor 1 only  |  |           |           |
|       | Debtor 2 only  | ☐ Unliquidated   |           |           |
|       | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |           |           |
|       | $\square$ At least one of the debtors and another                                | Type of NONPRIORITY unsecured claim:   |           |           |
|       | ☐ Check if this claim is for a community debt                                    | ☐ Student loans  |           |           |
|       | Is the claim subject to offset?  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims                  |           |           |
|       | ■ No   | $\square$ Debts to pension or profit-sharing plans, and other similar debts  |           |           |
|       | Yes  | ■ Other. Specify Med1 02 Cepamerica  |           |           |
| 4.7   | State Farm Insurance   | Last 4 digits of account number  | \$        | 15,267.98 |
|       | Nonpriority Creditor's Name C/o MATEK AND MAZAR LLC 77 W WASHINGTON ST Unit 1313 | When was the debt incurred?  |           |           |
|       | Chicago, IL 60602  Number Street City State Zlp Code                             | As of the date you file, the claim is: Check all that apply  |           |           |
|       | Who incurred the debt? Check one.  | ☐ Contingent   |           |           |
|       | Debtor 1 only  |  |           |           |
|       | Debtor 2 only  | ☐ Unliquidated   |           |           |
|       | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |           |           |
|       | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured claim:   |           |           |
|       | ☐ Check if this claim is for a community   | ☐ Student loans  |           |           |
|       | debt<br>Is the claim subject to offset?  | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims                |           |           |

4.8 Village Of Carpentersville
Nonpriority Creditor's Name

Last 4 digits of account number

Other. Specify

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

> Judgment 2009-M1-021478

> > 2,000.00

\$

■ No

☐ Yes

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| Debtor 1 _J  | lose I Alv                 | rarado   | Document  | Page 21  | _ <b>0f</b> | 16<br>number (if know) |                       |                     |
|--|----------------------------|--|---|--|-------------|------------------------|-----------------------|---------------------|
|  |                            | Besinger Dr  | When was the debt inc   | When was the debt incurred?  |             |                        |                       |                     |
| Carpentersville, IL 60110  Number Street City State Zlp Code |                            |  | As of the date you file   | As of the date you file, the claim is: Check all that apply                        |             |                        |                       |                     |
| Who  | o incurred                 | the debt? Check one.   | ☐ Contingent  |  |             |                        |                       |                     |
|  | Debtor 1 on                | ly   | · ·   |  |             |                        |                       |                     |
|  | Debtor 2 on                | ly   | ☐ Unliquidated  |  |             |                        |                       |                     |
|  | Debtor 1 an                | d Debtor 2 only  | ☐ Disputed  |  |             |                        |                       |                     |
|  | At least one               | of the debtors and another   | Type of NONPRIORITY   | Y unsecured cla  | aim:        |                        |                       |                     |
| □ debt   |                            | s claim is for a community   | ☐ Student loans   |  |             |                        |                       |                     |
|  |                            | bject to offset?   | Obligations arising on ot report as priority cla                  |  | on agre     | ement or divorce that  | you did               |                     |
|  | No                         |  | Debts to pension or   | profit-sharing pla   | ans, an     | d other similar debts  |                       |                     |
|  | Yes                        |  | Other. Specify  | Water Bil  | I           |                        |                       |                     |
|  |                            |  |   |  |             |                        |                       |                     |
| Part 3:  | ist Other                  | s to Be Notified About a De  | bt That You Already Li  | isted  |             |                        |                       |                     |
| trying to co   | ollect from<br>one credite | ou have others to be notified al<br>you for a debt you owe to some<br>or for any of the debts that you l<br>or 2, do not fill out or submit this | eone else, list the original (<br>listed in Parts 1 or 2, list th | creditor in Part   | s 1 or 2    | then list the collect  | tion agency here. Sim | ilarly, if you have |
| Name and   | l Address                  | 3  | On which entry in Pa  | rt 1 or Part2  | did y       | ou list the origina    | I creditor?           |                     |
| Keis Georg   |                            |  | Line 4.7 of (Check on   | Line <u>4.7</u> of (Check one): □ Part 1: Creditors with Priority Unsecured Claims |             |                        |                       |                     |
| 1 S LaSall<br>#2046  | e St                       |  |   |  | Part 2      | 2: Creditors with      | Nonpriority Unsec     | cured Claims        |
| Chicago, II  | L 60602                    |  |   |  |             |                        |                       |                     |
|  |                            |  | Last 4 digits of accou  | unt number   |             |                        |                       |                     |
| Part 4: A  | Add the A                  | mounts for Each Type of Ur   | nsecured Claim  |  |             |                        |                       |                     |
| 6. Total the a   |                            | certain types of unsecured clair   | ms. This information is for                                       | r statistical repo   | orting p    | ourposes only. 28 U.S  | 3.C. §159. Add the am | ounts for each type |
|  |                            |  |   |  |             | Total claim            |                       |                     |
|  | 6a.                        | Domestic support obligations   | 5   |  | 6a.         | \$                     | 0.00                  |                     |
| Total claims<br>from Part 1                                  | 6b.                        | Taxes and certain other debts  | s you owe the government  | t  | 6b.         | \$                     | 0.00                  |                     |
|  | 6c.                        | Claims for death or personal   | injury while you were into  | xicated  | 6c.         | \$                     | 0.00                  |                     |
|  | 6d.                        | Other. Add all other priority uns  | secured claims. Write that a                                      | mount here.  | 6d.         | \$                     | 0.00                  |                     |
|  | 6e.                        | Total. Add lines 6a through 6d.  |   |  | 6e.         | \$                     | 0.00                  |                     |
|  |                            |  |   |  |             |                        |                       |                     |
|  | 6f.                        | Student loans  |   |  | 6f.         | Total Claim<br>\$      | 0.00                  |                     |
| Total claims   |                            |  |   |  |             | Ť                      |                       |                     |
| from Part 2  | 6g.                        | Obligations arising out of a se<br>did not report as priority clain  |   | vorce that you   | 6g.         | \$                     | 0.00                  |                     |
|  | 6h.                        | Debts to pension or profit-sha   |   | ilar debts   | 6h.         | \$                     | 0.00                  |                     |
|  | 6i.                        | Other. Add all other nonpriority   | • • •   |  |             | \$                     | 24,633.98             |                     |
|  |                            |  |   |  |             | -                      |                       |                     |

Total. Add lines 6f through 6i.

24,633.98

| Fill in this infor                      | mation to identify your | case:             |             |                                   |
|---|-------------------------|-------------------|-------------|-----------------------------------|
| Debtor 1                                | Jose I Alvarado         |                   |             |                                   |
|   | First Name              | Middle Name       | Last Name   |                                   |
| Debtor 2                                |                         |                   |             |                                   |
| (Spouse if, filing)                     | First Name              | Middle Name       | Last Name   |                                   |
| United States Bankruptcy Court for the: |                         | NORTHERN DISTRICT | OF ILLINOIS |                                   |
| Case number                             |                         |                   |             |                                   |
| (if known)                              |                         |                   |             | ☐ Check if this is amended filing |

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or company with whom you have the contract or lease<br>Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|--|---|
| 2.1 Heriberto Vidales<br>499 Maple Ave<br>Carpentersville, IL 60110  | Residential Lease                       |

|                     |   | Docume                       | ent Page 23 d           | of 46   |          |
|---------------------|---|------------------------------|-------------------------|---|----------|
| Fill in this i      | nformation to identify your   | case:                        |                         |   |          |
| Debtor 1            | Jose I Alvarado   |                              |                         |   |          |
| DODIOI 1            | First Name  | Middle Name                  | Last Name               |   |          |
| Debtor 2            |   |                              |                         |   |          |
| (Spouse if, filing  | ) First Name  | Middle Name                  | Last Name               |   |          |
| United State        | es Bankruptcy Court for the:  | NORTHERN DISTRICT            | OF ILLINOIS             |   |          |
| Case numbe          | ⊇r  |                              |                         |   |          |
| (if known)          | <del></del>   |                              |                         | ☐ Check if this is a  | ın       |
|                     |   |                              |                         | amended filing  |          |
|                     |   |                              |                         |   |          |
| Official            | Form 106H   |                              |                         |   |          |
| Schodi              | ule H: Your Cod   | ahtars                       |                         | 4   | 12/4E    |
| Scried              | ale II. Tour Cou  | EDIOI 2                      |                         | 1   | 12/15    |
|                     | und case number (if known) ou have any codebtors? (If                         | • •                          |                         | as a codebtor.  |          |
|                     |   |                              |                         |   |          |
| ■ No                |   |                              |                         |   |          |
| ☐ Yes               |   |                              |                         |   |          |
|                     | i <mark>n the last 8 years, have you</mark><br>, California, Idaho, Louisiana |                              |                         | ry? (Community property states and territories includington, and Wisconsin.)  | de       |
| _                   |   |                              |                         |   |          |
|                     | Go to line 3.   |                              |                         |   |          |
| ⊔ Yes.              | Did your spouse, former spo   | use, or legal equivalent liv | e with you at the time? |   |          |
|                     |   |                              |                         |   |          |
| in line 2<br>Form 1 | 2 again as a codebtor only  | if that person is a guarar   | ntor or cosigner. Make  | r if your spouse is filing with you. List the person<br>sure you have listed the creditor on Schedule D<br>06G). Use Schedule D, Schedule E/F, or Schedul | (Officia |
|                     | A Vous and shaken   |                              |                         | Out was 0. The anaditon to sub-one year out the   | 1-1-4    |
|                     | olumn 1: Your codebtor<br>ame, Number, Street, City, State and Z              | IP Code                      |                         | Column 2: The creditor to whom you owe the<br>Check all schedules that apply:   | e debt   |
|                     |   |                              |                         |   |          |
| 3.1                 |   |                              |                         | ☐ Schedule D, line  |          |
| N                   | ame   |                              |                         | ☐ Schedule E/F, line  |          |
|                     |   |                              |                         | ☐ Schedule G, line  |          |
| N                   | umber Street  |                              |                         | _   |          |
| C                   | ity   | State                        | ZIP Code                |   |          |
|                     |   |                              |                         |   |          |
| 3.2                 | ame   |                              |                         | Schedule D, line  |          |
| IN                  |   |                              |                         | ☐ Schedule E/F, line  |          |
|                     |   |                              |                         | ☐ Schedule G, line  |          |
|                     | umber Street  | Otata                        | 710.0                   | _   |          |
| C                   | ity   | State                        | ZIP Code                |   |          |

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| Eill               | in this information to identify your c  | 000:  |   |                     |               | i                    |                       |                       |                                |                   |
|--------------------|---|---|---|---------------------|---------------|----------------------|-----------------------|-----------------------|--------------------------------|-------------------|
|                    | otor 1 Jose I Alvara  |   |   |                     |               |                      |                       |                       |                                |                   |
|                    | otor 2  puse, if filing)  |   |   |                     | _             |                      |                       |                       |                                |                   |
| Uni                | ted States Bankruptcy Court for the   | : NORTHERN DISTRIC                                    | CT OF ILLINOIS                                |                     |               |                      |                       |                       |                                |                   |
|                    | se number<br>nown)  |   |   |                     |               | □ A                  |                       | ed filing<br>ent show | ing postpetition               |                   |
| O                  | fficial Form 106l   |   |   |                     |               | _                    | IM / DD/ \            |                       | Tollowing date.                | •                 |
|                    | chedule I: Your Inc   | ome   |   |                     |               | IV                   | IIVI / DD/            |                       |                                | 12/15             |
| sup<br>spo<br>atta | as complete and accurate as pos-<br>plying correct information. If you<br>use. If you are separated and you<br>ch a separate sheet to this form.<br>tt: | are married and not fili<br>ir spouse is not filing w | ng jointly, and your<br>ith you, do not inclu | spouse<br>ude infor | is li<br>mati | ving with<br>on abou | you, inc<br>t your sp | lude info             | ormation abou<br>more space is | t your<br>needed, |
| 1.                 | Fill in your employment information.  |   |   |                     |               |                      | Debtor 2              | 2 or non-             | -filing spouse                 |                   |
|                    | If you have more than one job, attach a separate page with information about additional   | Employment status                                     | ■ Employed                                    | ■ Employed          |               |                      | ☐ Empl                | loyed                 |                                |                   |
|                    |   | Employment status                                     | ☐ Not employed                                |                     |               |                      | ☐ Not e               | employed              |                                |                   |
|                    | employers.  | Occupation  | Forklift Operator                             | •                   |               |                      |                       |                       |                                |                   |
|                    | Include part-time, seasonal, or self-employed work.   | Employer's name                                       | McKesson                                      | McKesson            |               |                      |                       |                       |                                |                   |
|                    | Occupation may include student or homemaker, if it applies.   | Employer's address                                    | 300 Airport Rd.<br>Elgin, IL 60123            |                     |               |                      |                       |                       |                                |                   |
|                    |   | How long employed t                                   | here? Starting                                | g Monda             | у             |                      | _                     |                       |                                |                   |
| Par                | t 2: Give Details About Mo  | nthly Income  |   |                     |               |                      |                       |                       |                                |                   |
|                    | mate monthly income as of the duse unless you are separated.  | ate you file this form. If                            | you have nothing to                           | report for          | any           | line, writ           | e \$0 in the          | e space.              | Include your no                | on-filing         |
|                    | u or your non-filing spouse have mee space, attach a separate sheet to  |   | ombine the information                        | on for all          | emp           | loyers for           | that pers             | son on the            | e lines below. If              | you need          |
|                    |   |   |   |                     |               | For Del              | otor 1                |                       | ebtor 2 or<br>iling spouse     |                   |
| 2.                 | List monthly gross wages, sala deductions). If not paid monthly,  |   |   | 2.                  | \$            | 2                    | ,253.34               | \$                    | N/A                            |                   |
| 3.                 | Estimate and list monthly overt   | ime pay.  |   | 3.                  | +\$           |                      | 0.00                  | +\$_                  | N/A                            |                   |
| 4.                 | Calculate gross Income. Add lin   | ne 2 + line 3.  |   | 4.                  | \$            | 2,2                  | 53.34                 | \$_                   | N/A                            |                   |

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| Deb | tor 1   | Jose I Alvarado   | _         | Cas  | se number (if kn | own) |      |                              |           |
|-----|---|---|-----------|------|------------------|------|------|------------------------------|-----------|
|     |   |   |           | F    | or Debtor 1      |      |      | Debtor 2 or<br>filing spouse |           |
|     | Cop   | y line 4 here   | 4.        | \$   | 2,253            | .34  | \$   | N/A                          | _         |
| 5.  | List  | all payroll deductions:   |           |      |                  |      |      |                              |           |
| ٥.  | 5a.   | Tax, Medicare, and Social Security deductions   | 5a.       | \$   | 563              | 34   | \$   | N/A                          |           |
|     | 5b.   | Mandatory contributions for retirement plans  | 5b.       |      |                  | .00  | \$   | N/A                          | _         |
|     | 5c.   | Voluntary contributions for retirement plans  | 5c.       | \$   |                  | .00  | \$   | N/A                          | _         |
|     | 5d.   | Required repayments of retirement fund loans  | 5d.       | \$   |                  | .00  | \$   | N/A                          | _         |
|     | 5e.   | Insurance   | 5e.       | \$   | 0                | .00  | \$   | N/A                          | _         |
|     | 5f.   | Domestic support obligations  | 5f.       | \$   |                  | .00  | \$   | N/A                          | _         |
|     | 5g.   | Union dues  | 5g.       |      |                  | .00  | \$   | N/A                          | _         |
|     | 5h.   | Other deductions. Specify:  | 5h.       | + \$ | 0                | .00  | + \$ | N/A                          | _         |
| 6.  | Add   | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.        | \$   | 563              | .34  | \$   | N/A                          | <u>-</u>  |
| 7.  |   | rulate total monthly take-home pay. Subtract line 6 from line 4.  | 7.        | \$   | 1,690            | .00  | \$   | N/A                          | <u>-</u>  |
| 8.  | List<br>8a.   | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total           |           |      |                  |      |      |                              |           |
|     |   | monthly net income.   | 8a.       | \$   | 0                | .00  | \$   | N/A                          |           |
|     | 8b.   | Interest and dividends  | 8b.       | \$   | 0                | .00  | \$   | N/A                          |           |
|     | 8c.   | Family support payments that you, a non-filing spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.   | 8c.       | ٠.   |                  | .00  | \$   | N/A                          | _         |
|     | 8d.   | Unemployment compensation   | 8d.       | ٠.   |                  | .00  | \$   | N/A                          | _         |
|     | 8e.   | Social Security   | 8e.       | \$   | 0                | .00  | \$   | N/A                          | _         |
|     | 8f.   | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | ce<br>8f. | \$   | 0                | .00  | \$   | N/A                          |           |
|     | 8g.   | Pension or retirement income  | 8g.       | \$   | 0                | .00  | \$   | N/A                          | _         |
|     | 8h.   | Other monthly income. Specify:  | 8h.       | + \$ | 0                | .00  | + \$ | N/A                          | _         |
| 9.  | Add   | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.        | \$_  | 0                | .00  | \$   | N//                          | A         |
| 10. | Calc  | ulate monthly income. Add line 7 + line 9.  | 10.       | 6    | 1,690.00         | + \$ |      | N/A = \$                     | 1.690.00  |
|     |   | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  |           |      | .,000.00         | `-   |      |                              | .,000.00  |
| 11. | 1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. +\$ 0.00 |   |           |      |                  |      |      |                              |           |
| 12. |   | the amount in the last column of line 10 to the amount in line 11. The re that amount on the Summary of Schedules and Statistical Summary of Ceres  |           |      |                  |      |      | 12. \$                       |           |
| 12  | D ·-  | ou expect an increase or decrease within the year after you file this for   | m2        |      |                  |      |      | monthl                       | ly income |
| 13. | D0 y ■  | No.  Yes. Explain:  | III f     |      |                  |      |      |                              |           |

|                |   |                                       |                             |  |  | 1                                |  |  |
|----------------|---|---------------------------------------|-----------------------------|--|--|----------------------------------|--|--|
| Fill i         | n this informa                          | tion to identify ye                   | our case:                   |  |  |                                  |  |  |
| Debto          | or 1                                    | Jose I Alvara                         | do                          |  |  |                                  | eck if this is:                          |  |
| Debto          | or 2                                    |                                       |                             |  |  |                                  | An amended filing A supplement sho       | wing postpetition chapter                              |
| (Spot          | use, if filing)                         | -                                     |                             |  | -  |                                  |  | the following date:                                    |
| Unite          | d States Bankr                          | uptcy Court for the:                  | NORTH                       | ERN DISTRICT OF ILLIN                                      | OIS  |                                  | MM / DD / YYYY                           |  |
| Case<br>(If kn | numberown)                              |                                       |                             |  |  |                                  |  |  |
| Of             | ficial Fo                               | rm 106J                               |                             |  |  |                                  |  |  |
| Sc             | hedule                                  | J: Your                               | Exper                       | ises   |  |                                  |  | 12/1   |
| Be a           | s complete a                            | and accurate as                       | possible<br>eded, atta      | . If two married people a<br>ach another sheet to this     |  |                                  |  |  |
| Part           |   | ibe Your House                        | hold                        |  |  |                                  |  |  |
| 1.             | Is this a joir                          |                                       |                             |  |  |                                  |  |  |
|                | ■ No. Go to                             | = .                                   | in a separ                  | ate household?   |  |                                  |  |  |
|                | _ N                                     |                                       |                             |  |  |                                  |  |  |
|                |   |                                       | st file Offic               | ial Form 106J-2, Expense                                   | s for Separate Hous  | ehold of De                      | ebtor 2.                                 |  |
| 2.             | Do vou have                             | e dependents?                         | ■ No                        |  |  |                                  |  |  |
|                | Do not list D                           | •                                     | _                           | Fill out this information for                              | Dependent's relati   | onshin to                        | Dependent's                              | Does dependent   |
|                | and Debtor 2                            |                                       | ☐ Yes.                      | each dependent   | Debtor 1 or Debtor   |                                  | age                                      | live with you?   |
|                | Do not state                            | the                                   |                             |  |  |                                  |  | □ No   |
|                | dependents                              | names.                                |                             |  |  |                                  |  | ☐ Yes  |
|                |   |                                       |                             |  |  |                                  |  | □ No   |
|                |   |                                       |                             |  |  |                                  |  | ☐ Yes  |
|                |   |                                       |                             |  |  |                                  |  | □ No   |
|                |   |                                       |                             |  |  |                                  |  | ☐ Yes  |
|                |   |                                       |                             |  |  |                                  |  | □ No<br>□ Yes  |
| 3.             | Do vour exp                             | enses include                         | _                           | Na   |  |                                  |  | □ Yes  |
| 0.             | expenses of                             | f people other t                      | han $_{oldsymbol{\square}}$ | No<br>Yes  |  |                                  |  |  |
|                | yourself and                            | d your depende                        | nts?                        | 162  |  |                                  |  |  |
| Part           | 2: Estim                                | ate Your Ongoi                        | ng Month                    | ly Expenses  |  |                                  |  |  |
| expe           | mate your exenses as of a licable date. | openses as of your date after the l   | our bankr<br>bankrupto      | uptcy filing date unless y<br>y is filed. If this is a sup | ou are using this followed are using the second control of the sec | orm as a s<br>e <i>J</i> , check | supplement in a Ch<br>the box at the top | apter 13 case to report<br>of the form and fill in the |
|                |   |                                       |                             | government assistance cluded it on Schedule I:             |  |                                  |  |  |
| (Offi          | icial Form 10                           | )6I.)                                 |                             |  |  | -                                | Your exp                                 | enses  |
| 4.             |   | or home owners<br>and any rent for th |                             | uses for your residence.                                   | nclude first mortgag   | e 4.                             | \$                                       | 400.00   |
|                | If not includ                           | led in line 4:                        |                             |  |  |                                  |  |  |
|                | 4a. Real e                              | estate taxes                          |                             |  |  | 4a.                              | \$                                       | 0.00   |
|                |   | rty, homeowner's                      | s, or renter                | 's insurance   |  | 4b.                              | ·  | 0.00   |
|                |   | •                                     |                             | upkeep expenses  |  | 4c.                              | \$                                       | 0.00   |
|                |   | owner's associat                      |                             |  |  | 4d.                              | ·  | 0.00   |
| 5.             | Additional r                            | nortgage payme                        | ents for yo                 | our residence, such as ho                                  | me equity loans  | 5.                               | \$                                       | 0.00   |

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| 10.<br>11.<br>12.<br>13.<br>14.<br>5a.<br>5b.<br>5c.                   | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$         | 100.00<br>50.00<br>250.00<br>0.00<br>315.00<br>0.00<br>200.00<br>100.00<br>200.00<br>100.00<br>0.00  |
|--|--|--|
| 6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 5b. 5c.                       | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$         | 50.00<br>250.00<br>0.00<br>315.00<br>0.00<br>200.00<br>100.00<br>200.00<br>100.00<br>0.00  |
| 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 5b. 5c.                           | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$         | 250.00<br>0.00<br>315.00<br>0.00<br>200.00<br>100.00<br>200.00<br>100.00<br>0.00   |
| 6d.<br>7.<br>8.<br>9.<br>10.<br>11.<br>12.<br>13.<br>14.<br>5b.<br>5c. | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$         | 0.00<br>315.00<br>0.00<br>200.00<br>100.00<br>200.00<br>100.00<br>0.00   |
| 7.<br>8.<br>9.<br>10.<br>11.<br>12.<br>13.<br>14.<br>5a.<br>5b.        | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$         | 0.00<br>315.00<br>0.00<br>200.00<br>100.00<br>200.00<br>100.00<br>0.00   |
| 8.<br>9.<br>10.<br>11.<br>12.<br>13.<br>14.<br>5a.<br>5b.              | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$         | 315.00<br>0.00<br>200.00<br>100.00<br>100.00<br>200.00<br>100.00<br>0.00   |
| 9.<br>10.<br>11.<br>12.<br>13.<br>14.<br>5a.<br>5b.                    | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$         | 0.00<br>200.00<br>100.00<br>100.00<br>200.00<br>100.00<br>0.00   |
| 9.<br>10.<br>11.<br>12.<br>13.<br>14.<br>5a.<br>5b.                    | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$         | 200.00<br>100.00<br>100.00<br>200.00<br>100.00<br>0.00   |
| 10.<br>11.<br>12.<br>13.<br>14.<br>5a.<br>5b.<br>5c.                   | \$   | 100.00<br>100.00<br>200.00<br>100.00<br>0.00   |
| 11.<br>12.<br>13.<br>14.<br>5a.<br>5b.<br>5c.                          | \$   | 100.00<br>200.00<br>100.00<br>0.00   |
| 12.<br>13.<br>14.<br>5a.<br>5b.<br>5c.                                 | \$<br>\$<br>\$<br>\$   | 200.00<br>100.00<br>0.00   |
| 13.<br>14.<br>5a.<br>5b.<br>5c.  | \$<br>\$<br>\$   | 100.00   |
| 14.<br>5a.<br>5b.<br>5c.   | \$   | 0.00   |
| 14.<br>5a.<br>5b.<br>5c.   | \$   | 0.00   |
| 5a.<br>5b.<br>5c.  | \$   |  |
| 5b.<br>5c.   | ·  |  |
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| 5c.  |  | 0.00   |
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| 16.  | \$   | 0.00   |
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| 7a.  | \$   | 0.00   |
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|  |  | 1,815.00   |
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| Зс.  | \$   | -125.00  |
| this<br>je pa  | s form?<br>yment to increase o                                   | or decrease because of a   |
| pen  | ises.  |  |
|  | 5d. 16. 7a. 7b. 7c. 7d. 18. 19. 0a. 0b. 0c. 0d. 21. 3a. 3b. this | 5d. \$  16. \$  7a. \$  7b. \$  7c. \$  7d. \$  18. \$  19. I: Your Income.  0a. \$  0b. \$  0c. \$  0d. \$  0e. \$  21. +\$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$ |

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| Fill in this infor              | mation to identify your  | case:                    |                    |   |   |
|---------------------------------|--|--------------------------|--------------------|---|---|
| Debtor 1                        | Jose I Alvarado  |                          |                    |   |   |
|                                 | First Name   | Middle Name              | Last Name          |   |   |
| Debtor 2<br>(Spouse if, filing) | First Name   | Middle Name              | Last Name          |   |   |
|                                 |  |                          |                    |   |   |
| United States Ba                | ankruptcy Court for the:   | NORTHERN DISTRICT        | OF ILLINOIS        |   |   |
| Case number                     |  |                          |                    |   |   |
| (if known)                      |  |                          |                    |   | ☐ Check if this is an                             |
|                                 |  |                          |                    |   | amended filing                                    |
|                                 |  |                          |                    |   |   |
| Official For                    | m 106Dec   |                          |                    |   |   |
|                                 |  | ا میرام ایران امرا       | Dabtarla           | . Cabadulaa   |   |
| Declarat                        | tion About a   | <u>ın Individual</u>     | Deptors            | s Scheaules   | 12/15   |
| years, or both. 1               | y or property by fraud ii<br>8 U.S.C. §§ 152, 1341, 1<br>n Below |                          | kruptcy case can   | result in fines up to \$250,0                         | 000, or imprisonment for up to 20                 |
| Did you pa                      | ay or agree to pay some  | one who is NOT an attor  | rney to help you t | fill out bankruptcy forms?                            |   |
| ■ No                            |  |                          |                    |   |   |
| ☐ Yes.                          | Name of person   |                          |                    | . Attach Bankruptcy Peti<br>and Signature (Official F | tion Preparer's Notice, Declaration,<br>orm 119). |
|                                 | alty of perjury, I declare<br>e true and correct.                | that I have read the sum | nmary and sched    | ules filed with this declarat                         | ion and   |
| X /s/ Jos                       | e I Alvarado   |                          | X                  |   |   |
| Jose I                          | Alvarado   |                          |                    | ature of Debtor 2                                     |   |
| Signatu                         | re of Debtor 1   |                          |                    |   |   |

Date

Date December 11, 2015

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| Fill   | in this information                      | n to identify you                | r case:  |   |  |   |  |
|--|--|----------------------------------|--|---|--|---|--|
| Deb  |  | se I Alvarado                    |  |   |  |   |  |
| Dok  | First<br>otor 2                          | t Name                           | Middle Name  | Last Name   |  |   |  |
|  |  | t Name                           | Middle Name  | Last Name   |  |   |  |
| Unit   | ted States Bankrup                       | tcy Court for the:               | NORTHERN DISTRICT (  | OF ILLINOIS   |  |   |  |
|  |  | ,                                |  |   |  |   |  |
|  | se number<br>lown)                       |                                  |  |   | _  | Check if this is an mended filing                     |  |
| Sta<br>Be a  | is complete and a                        | Financial .                      | ible. If two married people                                    |   | equally responsible for su   |   |  |
| info<br>num  | rmation. If more s<br>ber (if known). An | pace is needed<br>swer every que | attach a separate sheet to                                     | this form. On the top of an                                       | y additional pages, write yo   |   |  |
| 1.   | What is your curr                        | ent marital statu                | ıs?  |   |  |   |  |
|  | Married                                  |                                  |  |   |  |   |  |
|  | ☐ Not married                            |                                  |  |   |  |   |  |
| 2. During the last 3 years, have you lived anywhere other than where you live now? |  |                                  |  |   |  |   |  |
|  | □ No                                     |                                  |  |   |  |   |  |
|  |  | f the places you                 | lived in the last 3 years. Do n                                | not include where you live nov                                    | V.   |   |  |
|  | Debtor 1 Prior A                         | btor 1 Prior Address:            |  | Debtor 2 Prior Ad   | dress:   | Dates Debtor 2<br>lived there                         |  |
|  | 67 Alameda Dr<br>Carpentersville,        | IL 60110                         | From-To: 2012-2015   | ☐ Same as Debtor 1  |  | ☐ Same as Debtor 1 From-To:                           |  |
| 3.<br>state  | No Yes. Make su                          | re you fill out So               | nlifornia, Idaho, Louisiana, Ne<br>hedule H: Your Codebtors (C | ovada, New Mexico, Puerto R                                       | nity property state or territo ico, Texas, Washington and vertical ico, and vertical | Wisconsin.)   |  |
|  |  |                                  |  | all businesses, including par<br>ve together, list it only once u |  |   |  |
|  | □ No                                     |                                  |  |   |  |   |  |
|  | Yes. Fill in the                         | e details.                       |  |   |  |   |  |
|  |  |                                  | Debtor 1   |   | Debtor 2   |   |  |
|  |  |                                  | Sources of income<br>Check all that apply.                     | Gross income<br>(before deductions and<br>exclusions)             | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions<br>and exclusions) |  |
|  | m January 1 of cu<br>date you filed for  |                                  | ■ Wages, commissions, bonuses, tips                            | \$41,399.16   | ☐ Wages, commissions, bonuses, tips  |   |  |
|  |  |                                  | ☐ Operating a business   |   | ☐ Operating a business   |   |  |

Page 30 of 46 Case number (if known) Debtor 1 Jose I Alvarado

|           |           |                         |  | Debtor 1   |  |   |  |                            | Debtor 2   |  |   |
|-----------|-----------|-------------------------|--|--|--|---|--|----------------------------|--|--|---|
|           |           |                         |  |  | of income<br>that apply.   | (before   | s income<br>re deductions and<br>sions)  |                            | Sources of inco<br>Check all that ap   |  | Gross income<br>(before deductions<br>and exclusions) |
|           |           | dar year:<br>December   | 31, 2014 )   | ■ Wages bonuses,   | s, commissions,<br>tips  |   | \$53,189.66  |                            | ☐ Wages, com<br>conuses, tips  | missions,  |   |
|           |           |                         |  | ☐ Opera  | ting a business  |   |  | ı                          | Operating a l  | ousiness   |   |
|           |           | dar year be<br>December |  | ■ Wages  | s, commissions,  |   | \$49,500.00  |                            | ☐ Wages, com   | missions,  |   |
|           |           |                         |  | ☐ Opera  | ting a business  |   |  | I                          | Operating a l  | ousiness   |   |
| Li<br>■   | No        | source and t            | J  | ome from ea  | ach source separa  | ately. Do   | not include income   | e tha                      | t you listed in lir  | ne 4.  |   |
|           | Yes.      | Fill in the de          | etails.  |  |  |   |  |                            |  |  |   |
|           |           |                         |  | Debtor 1   |  |   |  |                            | Debtor 2   |  |   |
|           |           |                         |  |  | of income<br>below   |   | s income<br>re deductions and<br>sions)  |                            | Sources of inco<br>Describe below.   |  | Gross income<br>(before deductions<br>and exclusions) |
| Part 3    | List      | Certain Pa              | yments You   | Made Befo  | ore You Filed for  | Bankrup   | otcy   |                            |  |  |   |
| 6. A<br>□ | ] No.     | During the No. Yes      | 90 days before Go to line 7 List below expaid that cruton adjustment or Debtor 2 cruto Go to line 7 List below expaid that cruto adjustment or Debtor 2 cruto Go to line 7 List below expaid that cruto adjustment or Debtor 2 cruto Go to line 7 List below expaid that cruto go days before Go to line 7 | Debtor 2 has a personal, fore you filed a personal, fore you filed a personal | amily, or househod amily, or househod for bankruptcy, do not include payment of an attorney for to an attorney for to an attorney for to an attorney for to whom you pays to whom you pays to bankruptcy, do not bankruptcy, d | umer del<br>bld purpos<br>lid you pa<br>lid a total<br>nts for do<br>this bank<br>rs after th<br>umer del<br>lid you pa | bts. Consumer delese."  ay any creditor a to of \$6,225* or more of support ob ruptcy case. That for cases filed of the cases filed of the cases filed of \$600 or more a second se | e in obligation or otal or | f \$6,225* or mo one or more pay ions, such as ch after the date of f \$600 or more? | re?  ments and a support of adjustments  you paid that | ut creditor. Do not                                   |
|           |           |                         |  |  | lomestic support on the contract of the contra | obligation  | s, such as child su  | ıoqqı                      | rt and alimony.  | Also, do not   | include payments to                                   |
| C         | Creditor' | s Name and              | d Address  |  | Dates of payme   | ent   | Total amount paid  | ,                          | Amount you still owe   | Was this p   | payment for   |

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Case number (if known) Debtor 1 Jose I Alvarado

| 7.  | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. |                            |                      |                      |                            |                              |  |  |  |  |
|-----|--|----------------------------|----------------------|----------------------|----------------------------|------------------------------|--|--|--|--|
|     | No   |                            |                      |                      |                            |                              |  |  |  |  |
|     | Yes. List all payments to an insider   |                            |                      |                      |                            |                              |  |  |  |  |
|     | Insider's Name and Address   | Dates of payment           | Total amount paid    | Amount you still owe | Reason for                 | this payment                 |  |  |  |  |
| 8.  | Within 1 year before you filed for bankruptinsider? Include payments on debts guaranteed or cos  |                            | ments or transfer    | any property on a    | ccount of a d              | ebt that benefited an        |  |  |  |  |
|     | No   |                            |                      |                      |                            |                              |  |  |  |  |
|     | Yes. List all payments to an insider   |                            |                      |                      |                            |                              |  |  |  |  |
|     | Insider's Name and Address   | Dates of payment           | Total amount paid    | Amount you still owe | Reason for<br>Include cred | this payment<br>litor's name |  |  |  |  |
| Pai | t 4: Identify Legal Actions, Repossession  | ns, and Foreclosures       |                      |                      |                            |                              |  |  |  |  |
| 9.  | Within 1 year before you filed for bankrupt: List all such matters, including personal injury modifications, and contract disputes.  No  |                            |                      |                      |                            |                              |  |  |  |  |
|     | Yes. Fill in the details.  |                            | -                    |                      |                            |                              |  |  |  |  |
|     | Case title Case number   | Nature of the case         | Court or agency      |                      | Status of th               | e case                       |  |  |  |  |
|     | Within 1 year before you filed for bankrupte Check all that apply and fill in the details below  No  |                            | erty repossessed, f  | foreclosed, garnis   | shed, attache              | d, seized, or levied?        |  |  |  |  |
|     | Yes. Fill in the information below.  | December the December      |                      | Data                 |                            | Value of the                 |  |  |  |  |
|     | Creditor Name and Address  | Describe the Property      |                      | Date                 |                            | Value of the<br>property     |  |  |  |  |
|     |  | Explain what happened      |                      |                      |                            |                              |  |  |  |  |
| 11. | Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?  No Yes. Fill in the details.   |                            |                      |                      |                            |                              |  |  |  |  |
|     | Creditor Name and Address  | Describe the action the    | e creditor took      |                      | action was                 | Amount                       |  |  |  |  |
| 12. | <ul> <li>Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?</li> <li>No</li> <li>Yes</li> </ul>  |                            |                      |                      |                            |                              |  |  |  |  |
| Pai | t 5: List Certain Gifts and Contributions  |                            |                      |                      |                            |                              |  |  |  |  |
| 13. | Within 2 years before you filed for bankrup  No  | tcy, did you give any gift | s with a total value | e of more than \$6   | 00 per person              | ?                            |  |  |  |  |
|     | ☐ Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  | Describe the gifts         |                      | Dates<br>the g       | s you gave<br>ifts         | Value                        |  |  |  |  |
|     | Person to Whom You Gave the Gift and Address:  |                            |                      |                      |                            |                              |  |  |  |  |

| De  | btor 1 _Jose I Alvarado   | Document                    | Page 32 of 46 Case number         | er (if known)                           |                   |  |  |  |  |  |  |
|-----|---|-----------------------------|-----------------------------------|---|-------------------|--|--|--|--|--|--|
|     |   |                             |                                   |   |                   |  |  |  |  |  |  |
| 14. | Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity  No            |                             |                                   |   |                   |  |  |  |  |  |  |
|     | Yes. Fill in the details for each gift or co  |                             |                                   | _                                       |                   |  |  |  |  |  |  |
|     | Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)                               |                             | ou contributed                    | Dates you contributed                   | Valu              |  |  |  |  |  |  |
| Pai | rt 6: List Certain Losses   |                             |                                   |   |                   |  |  |  |  |  |  |
| 15. | Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? |                             |                                   |   |                   |  |  |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |                             |                                   |   |                   |  |  |  |  |  |  |
|     | - 100. Till lift the detaile.   | Describe any insurance      | coverage for the loss             | Date of your                            | Value of propert  |  |  |  |  |  |  |
|     | how the loss occurred   | nclude the amount that in   | <del>-</del>                      | loss                                    | los               |  |  |  |  |  |  |
| Pa  | tt 7: List Certain Payments or Transfers  |                             |                                   |   |                   |  |  |  |  |  |  |
| 16. | Within 1 year before you filed for bankrup<br>consulted about seeking bankruptcy or pr<br>Include any attorneys, bankruptcy petition pro                    | reparing a bankruptcy p     | etition?                          |   | ty to anyone you  |  |  |  |  |  |  |
|     | □ No  |                             |                                   |   |                   |  |  |  |  |  |  |
|     | Yes. Fill in the details.   |                             |                                   |   |                   |  |  |  |  |  |  |
|     | Person Who Was Paid<br>Address<br>Email or website address<br>Person Who Made the Payment, if Not Yo  | transferred                 | l value of any property           | Date payment<br>or transfer was<br>made | Amount o          |  |  |  |  |  |  |
|     | THE SEMRAD LAW FIRM, LLC<br>20 S. Clark Street<br>28th Floor<br>Chicago, IL 60603<br>Chicago, IL 60603  |                             | \$1620 paid, \$1215 to fees,      | 10/15/2015                              | \$1,215.0         |  |  |  |  |  |  |
|     | rsemrad@semradlaw.com   |                             |                                   |   |                   |  |  |  |  |  |  |
| 17. | Within 1 year before you filed for bankrup promised to help you deal with your credi Do not include any payment or transfer that y                          | itors or to make paymer     |                                   | y or transfer any proper                | ty to anyone who  |  |  |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |                             |                                   |   |                   |  |  |  |  |  |  |
|     | Person Who Was Paid<br>Address  | Description and transferred | l value of any property           | Date payment<br>or transfer was<br>made | Amount o          |  |  |  |  |  |  |
| 18. | Within 2 years before you filed for bankru transferred in the ordinary course of your   |                             |                                   | roperty to anyone, other                | than property     |  |  |  |  |  |  |
|     | Include both outright transfers and transfers include gifts and transfers that you have alre-   | made as security (such a    | s the granting of a security inte | rest or mortgage on your                | property). Do not |  |  |  |  |  |  |
|     | ■ No  |                             |                                   |   |                   |  |  |  |  |  |  |

☐ Yes. Fill in the details.

**Person Who Received Transfer** Address

Person's relationship to you

Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

Official Form 107

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Case number (if known) Document

Debtor 1 Jose I Alvarado

| 19. | Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro  |  | ny property to a        | a self-settle | ed trust or similar device                           | of which you are a                            |  |  |
|-----|--|--|-------------------------|---------------|--|---|--|--|
|     | Yes. Fill in the details.  |  |                         |               |  |   |  |  |
|     | Name of trust  | Description and v  | alue of the pro         | perty trans   | sferred  | Date Transfer was made                        |  |  |
| Par | List of Certain Financial Accounts, Ins  | struments, Safe Deposi   | t Boxes, and S          | torage Uni    | ts   |   |  |  |
| 20. | Within 1 year before you filed for bankruptc sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, associated in the second of the | or other financial accou   | nts; certificate        | s of depos    |  |   |  |  |
| 21. | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)   | Last 4 digits of account number  | Type of acco instrument | unt or        | Date account was closed, sold, moved, or transferred | Last balance<br>before closing or<br>transfer |  |  |
| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?  No Yes. Fill in the details.   |  |                         |               |  |   |  |  |
|     | Name of Financial Institution<br>Address (Number, Street, City, State and ZIP Code)  | Who else had acc<br>Address (Number, State and ZIP Code)                 |                         | Describe      | the contents   | Do you still have it?                         |  |  |
| 22. | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy  No Yes. Fill in the details.   |  |                         |               |  |   |  |  |
|     | Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  | Who else has or h<br>to it?<br>Address (Number, S<br>State and ZIP Code) |                         |               | the contents   | Do you still have it?                         |  |  |
| Par | t 9: Identify Property You Hold or Control   | for Someone Else   |                         |               |  |   |  |  |
| 23. | Do you hold or control any property that so for someone.   | meone else owns? Incl  | ude any prope           | rty you bor   | rowed from, are storing                              | for, or hold in trust                         |  |  |
|     | ■ No<br>□ Yes. Fill in the details.  |  |                         |               |  |   |  |  |
|     | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)   | Where is the prop<br>(Number, Street, City, S<br>Code)                   |                         | Describe      | the property   | Value   |  |  |
| Par | t 10: Give Details About Environmental Info  | ormation   |                         |               |  |   |  |  |
| For | the purpose of Part 10, the following definition   | ons apply:   |                         |               |  |   |  |  |
| _   |  |  |                         |               |  |   |  |  |

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Jose I Alvarado

| 24. | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?   |   |  |                    |  |  |  |  |  |  |
|-----|--|---|--|--------------------|--|--|--|--|--|--|
|     | ■ No □ Yes. Fill in the details.   |   |  |                    |  |  |  |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit Address (Number, Street, City, State and ZIP Code)    | Environmental law, if you know it                                  | Date of notice     |  |  |  |  |  |  |
| 25. | Have you notified any governmental unit of a   | ny release of hazardous material?                                       |  |                    |  |  |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.   |   |  |                    |  |  |  |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit Address (Number, Street, City, State and ZIP Code)    | Environmental law, if you know it                                  | Date of notice     |  |  |  |  |  |  |
| 26. | Have you been a party in any judicial or admir   | nistrative proceeding under any env                                     | ironmental law? Include settlements a                              | and orders.        |  |  |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.   |   |  |                    |  |  |  |  |  |  |
|     | Case Title Case Number   | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case   | Status of the case |  |  |  |  |  |  |
| Par | t 11: Give Details About Your Business or Co   | onnections to Any Business  |  |                    |  |  |  |  |  |  |
| 27. | Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?   |   |  |                    |  |  |  |  |  |  |
|     | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  |   |  |                    |  |  |  |  |  |  |
|     | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)   |   |  |                    |  |  |  |  |  |  |
|     | ☐ A partner in a partnership   |   |  |                    |  |  |  |  |  |  |
|     | ☐ An officer, director, or managing exec   | cutive of a corporation   |  |                    |  |  |  |  |  |  |
|     | ☐ An owner of at least 5% of the voting  | or equity securities of a corporation                                   |  |                    |  |  |  |  |  |  |
|     | ■ No. None of the above applies. Go to Pa  | rt 12.  |  |                    |  |  |  |  |  |  |
|     | ☐ Yes. Check all that apply above and fill in  | n the details below for each busines                                    | s.   |                    |  |  |  |  |  |  |
|     | Business Name Address  | Describe the nature of the business                                     | Employer Identification number<br>Do not include Social Security r |                    |  |  |  |  |  |  |
|     |  | Name of accountant or bookkeeper  | ŕ  | iumber of friit.   |  |  |  |  |  |  |
| 28. | Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. |   |  |                    |  |  |  |  |  |  |
|     | ■ No   |   |  |                    |  |  |  |  |  |  |
|     | Yes. Fill in the details below.  |   |  |                    |  |  |  |  |  |  |
|     | Name Address (Number, Street, City, State and ZIP Code)  | Date Issued   |  |                    |  |  |  |  |  |  |

Page 35 of 46
Case number (if known) Debtor 1 Jose I Alvarado

| Part 12: | Sign | <b>Below</b> |
|----------|------|--------------|
|----------|------|--------------|

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection

|        | bankruptcy case can r<br>s.C. §§ 152, 1341, 1519, | esult in fines up to \$250,000, or imprisonment for up to 20 years, or both.<br>and 3571.             |
|--------|---|---|
| /s/ Jo | se I Alvarado                                     |   |
|        | I Alvarado<br>ture of Debtor 1                    | Signature of Debtor 2   |
| Date   | December 11, 2015                                 | Date  |
| -      | • •   | ges to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |
| ■ No   |   |   |
| ☐ Yes  | 3   |   |
| Did yo | u pay or agree to pay s                           | someone who is not an attorney to help you fill out bankruptcy forms?                                 |
| ■ No   |   |   |
| ☐ Yes  | s. Name of Person                                 | . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).   |

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| Fill in this infor  | mation to identify your  | case:             |             |                       |
|---------------------|--------------------------|-------------------|-------------|-----------------------|
| Debtor 1            | Jose I Alvarado          |                   |             |                       |
|                     | First Name               | Middle Name       | Last Name   |                       |
| Debtor 2            |                          |                   |             |                       |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name   |                       |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS |                       |
| Case number         |                          |                   |             |                       |
| (if known)          |                          |                   |             | ☐ Check if this is an |
|                     |                          |                   |             | amended filing        |

### Official Form 108

## Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt?  | Did you claim the property as exempt on Schedule C? |
|---|--|---|
| Creditor's  | ☐ Surrender the property.  | □ No  |
| name:   | Retain the property and redeem it.                               |   |
| Description of  | Retain the property and enter into a Reaffirmation Agreement.    | ☐ Yes   |
| property securing debt:                                   | ☐ Retain the property and [explain]:                             |   |
| Creditor's  | ☐ Surrender the property.  | □ No  |
| name:   | Retain the property and redeem it.                               | _   |
| Description of  | Retain the property and enter into a<br>Reaffirmation Agreement. | ☐ Yes   |
| property securing debt:                                   | ☐ Retain the property and [explain]:                             |   |
| Creditor's  | ☐ Surrender the property.  | □ No  |
| name:   | Retain the property and redeem it.                               | _   |
| Description of  | Retain the property and enter into a<br>Reaffirmation Agreement. | ☐ Yes   |
| property securing debt:                                   | ☐ Retain the property and [explain]:                             |   |
| Creditor's  | ☐ Surrender the property.  | □ No  |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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|             | (Form 8) (12/08)<br>name:<br>Description of<br>property<br>securing debt: |  | <ul> <li>□ Retain the property and redeem it.</li> <li>□ Retain the property and enter into a Reaffirmation Agreement.</li> <li>□ Retain the property and [explain]:</li> </ul> | ☐ Yes                        | Page 2                     |
|-------------|---|--|---|------------------------------|----------------------------|
| For<br>in t | any unexpired pe  | low. Do not list real estate lea                             | eases I listed in Schedule G: Executory Contracts and Uneses. Unexpired leases are leases that are still in effectase if the trustee does not assume it. 11 U.S.C. § 36         | ct; the lease period has not | n 106G), fil<br>yet ended. |
| De          | escribe your unex   | oired personal property leases                               |   | Will the lease be assu       | med?                       |
| Le          | ssor's name:  | Heriberto Vidales  |   | □ No                         |                            |
|             |   |  |   | ■ Yes                        |                            |
|             | escription of leased operty:  | Residential Lease  |   |                              |                            |
| Pa          | ort 3: Sign Below   | v  |   |                              |                            |
|             |   | jury, I declare that I have indicated to an unexpired lease. | ated my intention about any property of my estate the   | at secures a debt and any p  | ersonal                    |
| X           | /s/ Jose I Alvai  | rado   | x   |                              |                            |
|             | Jose I Alvarad<br>Signature of Deb  | <del>-</del>   | Signature of Debtor 2   |                              |                            |
|             | Date Dece   | mber 11, 2015  | Date  |                              |                            |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 15-41786 Doc 1 Filed 12/11/15 Entered 12/11/15 01:08:37 Desc Main Document Page 42 of 46

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court Northern District of Illinois**

| In re   | Jose I Alvarado  |  | Case  | No.    |                     |                           |
|---------|--|--|---|--------|---------------------|---------------------------|
|         |  | Debtor(  | S) Chap   | ter    | 7                   |                           |
|         | DISCLOSUI  | RE OF COMPENSATION OF  | ATTORNEY FOR  | R DI   | EBTOR(S)            |                           |
| C       | ompensation paid to me within o  | nd Fed. Bankr. P. 2016(b), I certify that I a<br>one year before the filing of the petition in<br>or(s) in contemplation of or in connection | bankruptcy, or agreed to be   | paid   | to me, for service  | that<br>es rendered or to |
|         | For legal services, I have agr   | reed to accept   | \$  |        | 1,215.00            |                           |
|         | Prior to the filing of this stat   | ement I have received  |   |        | 1,215.00            |                           |
|         |  |  |   |        | 0.00                |                           |
| 2. T    | The source of the compensation p   | paid to me was:  |   |        |                     |                           |
|         | ■ Debtor □ Other   | (specify):   |   |        |                     |                           |
| 3. T    | The source of compensation to be   | paid to me is:   |   |        |                     |                           |
|         | ■ Debtor □ Other   | (specify):   |   |        |                     |                           |
| 1. ■    | ■ I have not agreed to share the   | above-disclosed compensation with any o  | ther person unless they are   | mem    | bers and associate  | es of my law firm.        |
| [       |  | ove-disclosed compensation with a person<br>her with a list of the names of the people sh  |   |        |                     | ny law firm. A            |
| 5. I    | n return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: |  |   |        |                     |                           |
| b<br>c. | <ul> <li>Preparation and filing of any p</li> </ul>  | cial situation, and rendering advice to the does tition, schedules, statement of affairs and the meeting of creditors and confirmation       | l plan which may be require   | ed;    | •                   | oankruptcy;               |
| 5. B    | By agreement with the debtor(s),   | the above-disclosed fee does not include the   | ne following service:   |        |                     |                           |
|         |  | CERTIFICATI  | ON  |        |                     |                           |
|         | certify that the foregoing is a connkruptcy proceeding.  | mplete statement of any agreement or arrai   | ngement for payment to me   | for re | epresentation of tl | he debtor(s) in           |
| De      | ecember 11, 2015   | /s/ Israe  | el Moskovits  |        |                     |                           |
| Do      | ıte  |  | loskovits 6302579   |        |                     |                           |
|         |  |  | e of Attorney<br>MRAD LAW FIRM, LLC                                       |        |                     |                           |
|         |  | 20 S. C  | lark Street   |        |                     |                           |
|         |  |  |   |        |                     |                           |
|         | ·  | Israel N<br>Signatur<br>THE SE<br>20 S. C<br>28th Flo  | loskovits 6302579<br>re of Attorney<br>EMRAD LAW FIRM, LLC<br>lark Street |        |                     |                           |

(312) 913 0625 Fax: (312) 913 0631

rsemrad@semradlaw.com

Name of law firm

### CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC, to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I agree to pay The Semrad Law Firm, LLC **\$1215.00** in attorney fees plus costs in the amount of **\$405.00** to represent my interests in the preparation and filing of my Chapter 7 Petition and Schedules; preparation and attendance of the Section 341 Meeting of Creditors; review of any redemption agreements; review of any reaffirmation agreements; and case administration and monitoring. I further understand and agree that additional professional legal services will result in fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representing Client in Adversary Proceeding. \$300.00/hr.

Adding additional bills \$50.00

Motion to Reopen and Avoid Lien \$1000.00

Motion to Reopen \$350.00 + court costs

I understand that these fees must be paid before such work will be completed. I acknowledge and agree that as the above additional fees constitute post-petition services, they are not dischargeable in my Chapter 7 case.

I also understand that, unless otherwise agreed, my Chapter 7 bankruptcy case will not be filed until I pay the attorney fees in full. As The Semrad Law Firm, LLC will begin to work on my file immediately after entering into this contract; I understand that any and all funds paid are not refundable.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay the balance of any unpaid fees to The Semrad Law Firm, LLC. Any fees owing to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy may be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay unpaid fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw representation in the event that I do not sign a second retainer after filing my case promising to pay said fees or in the event that I do not pay said fees.

I understand that any funds that I am tendering to The Semrad Law Firm, LLC, as part of this advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm. I further understand that it is ordinarily my option to deposit funds with an attorney that shall remain my property as security for future services. However, The Semrad Law Firm, LLC, does not

Initial:

represent clients under such a security retainer because the preparation of a bankruptcy case requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while others may be only ministerial in nature. I further understand that the benefit that I am receiving under this fee arrangement is the commitment of The Semrad Law Firm, LLC, to perform any and all work reasonably necessary to file my case absent any extraordinary circumstances.

As The Semrad Law Firm, LLC, has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC. This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.\*

I also understand that, if I am refiling a case with The Semrad Law Firm, LLC, and an audit of the previous case(s) indicate that remaining attorney fees are owed; any initial funds I pay to refile will first be applied to the balance owed on the previous case(s). If client breaches this agreement, client will be responsible for all costs associated with enforcing the terms of this contract including but not limited to court costs and attorney fees.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC, or an agent thereof.

Date: 12/10/2015

. Jose Alvarado

\*DISCLAIMER

The creditors listed in your bankruptcy petition will receive notice of your bankruptcy filing from the Clerk of the United States Bankruptcy Court. Please be advised that it will be several days before these creditors receive the notice. Therefore, if you are concerned about a particular creditor taking immediate action against you, contact this creditor directly and provide the creditor with a copy of your Notice of Bankruptcy Filing. This is especially important if you are at risk of having you vehicle repossessed, real estate foreclosed, or wages garnished.

Jose Alvarado Matter Number 453319-001 Initial:

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## **United States Bankruptcy Court**Northern District of Illinois

|       |  | 1401 theri District of Infilois       |                                       |               |
|-------|--|---------------------------------------|---------------------------------------|---------------|
| In re | Jose I Alvarado                            |                                       | Case No.                              |               |
|       |  | Debtor(s)                             | Chapter 7                             |               |
|       | VE   | RIFICATION OF CREDITOR N              | MATRIX                                |               |
|       | , 2  |                                       | · · · · · · · · · · · · · · · · · · · |               |
|       |  | Number o                              | f Creditors:                          | 9             |
|       | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of cred | itors is true and correct to t        | he best of my |
| Date: | December 11, 2015                          | /s/ Jose I Alvarado Jose I Alvarado   |                                       |               |

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